

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: 02/02/09		2 Serial/Patent # 6201609								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	Amendment			\$						
	Extension of Time (2253)			\$						
	Notice of Appeal/Appeal			\$						
X	Petition (1462)		07/14/08	\$ 200.00						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
	Assignment			\$						
	Other			\$						
7 TOTAL AMOUNT OF REFUND			\$ 200.00							
8 TO BE REFUNDED BY:										
10 REASON:		X Treasury Check								
Overpayment		Credit Deposit A/C #:								
Duplicate Payment		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">--</td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					--			
		--								
X	No Fee Due (Explanation):									
Pet. Granted										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: Charlema Grant		TITLE: Atty								
SIGNATURE: /Charlema Grant/		PHONE: X-3215								
OFFICE: OP										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED:		DATE: 2/2/09								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: